

DELPHI

PURCHASE

PAGE 2

DELPHI SAGINAW STEERING SYSTEM  
3900 HOLLAND RD.  
SAGINAW MI  
48601

SHIP TO:  
(3SI) SERVICE ORDERS  
3900 HOLLAND RD  
SAGINAW MI  
48601  
US

ORDER: S2S45116

This Number Must Appear On All Invoices, Packing Slips,  
Packages and Bills of Lading.

(2) copies of your packing slip must accompany each shipment.  
Item Identification Number(s) must be shown on Packing Slips and  
Invoices.

Invoice Attn: Accounts Payable  
Do not Declare Valuation of Express Shipments or Insure Parcel  
Post.

VENDOR NUMBER 14-423-0695

INVOICE TO:  
DELPHI  
SEE INVOICE  
INSTRUCTIONS 00  
00000  
US

ORDER DATE  
10/16/03  
989-757-4048  
S RUDZINSKI  
Buyer

HE SERVICES CO  
ANCON TOOL DIV  
5117 S DORT HWY  
FLINT MI  
48507

This order is not binding until accepted. Acceptance should be evidenced by acknowledgment copy which should be  
returned to Buyer.  
On the reverse side hereof are the terms and conditions to which Seller agrees by acceptance of this order.  
This order, including the terms and conditions on the back and reverse side hereof, contains the complete and final  
agreement between Buyer and Seller and no other agreement in any way modifying any of said terms and conditions  
will be binding upon the Buyer unless made in writing and signed by Buyer's authorized representative.  
If Government Contract Number is Shown Hereon, additional Terms and Conditions  
Attached Herein Apply.

ALTERATION EFFECTIVE  
DATE

PURCHASING AGENT

PAYMENT TERMS

NET 2ND DAY OF 2ND MONTH

F.O.B. DESTINATION UNLESS OTHERWISE INDICATED  
SHIPPING POINT

SHIP VIA  
SEE BELOW

| QUANTITY<br>ORDERED | ITEM IDENTIFICATION NO. | NOUN NAME | DESCRIPTION | RFQ<br>NUMBER | DATE REQUIRED | TAX CODE/ % | BASE UNIT PRICE | PRICE<br>MULTIPLE | UNIT<br>MEAS |
|---------------------|-------------------------|-----------|-------------|---------------|---------------|-------------|-----------------|-------------------|--------------|
|---------------------|-------------------------|-----------|-------------|---------------|---------------|-------------|-----------------|-------------------|--------------|

PURCHASE ORDER ITEM. BE AWARE OF THE NONTAXABLE  
CONDITIONS AND DIRECT PAY PERMITS THAT WE HAVE AND DO  
NOT CHARGE US SALES TAX.

SALES TAX EXEMPTION CERTIFICATES

ALABAMA 805 OHIO 9S-002667

GEORGIA 300-45870-B TEXAS 1-38-3431131-1

INDIANA 1018702130011 WISCONSIN WDP-99-01-010037

KANSAS 98-003A MICHIGAN 38-3431131

MISSISSIPPI APPLIED FOR NEW JERSEY APPLIED FOR

NEW YORK DP-3487

FOR INVOICING PROBLEMS UNDER THIS PURCHASE ORDER

CONTACT SUPPLIER RELATIONS AT (248) 874-4636. DO NOT

CONTACT THE BUYER UNLESS SUPPLIER RELATIONS IN-

STRUCTS YOU TO DO SO. YOU WILL NEED YOUR INVOICE

NUMBER AS WELL AS THE PURCHASE ORDER NUMBER. (DC)

\*\*\*\*\*NOTICE TO CONTRACTORS\*\*\*\*\* (CF)

THIS FACILITY HAS CONFINED SPACES WHICH REQUIRE A

WRITTEN PERMIT PRIOR TO ENTRY IN ACCORDANCE WITH THE

OSHA STANDARD FOR PERMIT- REQUIRED CONFINED SPACES

(29 CFR1910.146) ENTRY PROCEDURES FOR THESE SPACES

HAVE BEEN DEVELOPED AND ARE CONTAINED IN THE CONFIN-

ED SPACE ENTRY PROGRAM DEVELOPED FOR THIS FACILITY

AND MUST BE FOLLOWED. IF YOU HAVE ANY QUESTIONS ABOUT

THIS INFORMATION CONTACT THE DELPHI SAGINAW HEALTH &

SAFETY DEPT. AT (517) 757-4348.

QUANTITY SHOWN ON THIS ORDER IS APPROXIMATE AND ARE

A0000798 USER STEPHEN PARKS

ORIGINAL

CONTINUE PAGE

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SMD103 01/15/2003

DELPHI

PURCHASE

PAGE 3

DELPHI SAGINAW STEERING SYSTEM  
3900 HOLLAND RD.  
SAGINAW MI  
48601

SHIP TO: (3SI) SERVICE ORDERS  
3900 HOLLAND RD  
SAGINAW MI  
48601

ORDER: S2S45116

US

VENDOR NUMBER 14-423-0695  
THE SERVICES CO  
ANCON TOOL DIV  
5117 S DORT HWY  
FLINT MI  
48507

INVOICE TO: DELPHI  
SEE INVOICE  
INSTRUCTIONS 00  
00000

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If Government Contract Number is Shown Hereon, additional terms and conditions Attached Hereeto Apply.

ORDER DATE 10/16/03  
ALTERNATION ISSUE DATE  
ALTERNATION EFFECTIVE DATE  
989-757-4048  
S RUDZINSKI  
S12 Buyer  
PURCHASING AGENT

PAYMENT TERMS

NET 2ND DAY OF 2ND MONTH

F.O.B. SHIPPING POINT DESTINATION UNLESS OTHERWISE INDICATED

SHIP VIA SEE BELOW

| ITEM | QUANTITY ORDERED | ITEM IDENTIFICATION NO. | NOUN NAME | DESCRIPTION   | R.F.O. NUMBER | DATE REQUIRED | TAX CODE/ % | BASE UNIT PRICE | PRICE MULTIPLE | UNIT MEAS |
|------|------------------|-------------------------|-----------|---|---------------|---------------|-------------|-----------------|----------------|-----------|
|      |                  |                         |           | NOT TO BE CONSTRUED AS REPRESENTING A COMMITMENT BY BUYER TO PURCHASE THESE QUANTITIES. |               |               |             |                 |                |           |
|      |                  |                         |           | TERMS AND CONDITIONS JANUARY 2001, APPLY OF WHICH SUPPLIER HAS RECEIVED A COPY.         |               |               |             |                 |                |           |

A000798 USER STEPHEN PARKS

ORIGINAL

LAST PAGE

SMD103 01/15/2003

SHIPPER/INVOICE



H.E. Services / Ancon Prototype & Machine / Universal Tool / Universal Inspection / Universal Manufacturing  
5117 S. Dort Hwy • Flint, MI 48507 • 810-743-4900 • Fax 810-743-8400

Delphi  
3900 Holland Ave  
Saginaw, MI 48601  
United States  
Attn: Dan Braun

INVOICE: LW 01-11

P.O. Number S2S45116

HES CONTACT: Amy Pumpera

DATE: 12/17/2003

DESCRIPTION:

For the Period: [01/05/2004 through 01/11/2004]

| ITEM CODE    | PROJECT                           | AMOUNT     |
|--------------|-----------------------------------|------------|
| PR393213 001 | 7622089700 - T&M for Larry Wehner | \$1,218.00 |
| TOTAL AMOUNT |                                   | \$1,218.00 |

FAXED  
4/8/04

4/8/04 -  
body - I haven't received payment as of 4/8/04  
Can you please look into it for me -

Thank You - Amy Pumpera

Remit Payment To:

c/o Comerica  
Department # 274201  
PO BOX 67000  
Detroit, MI 48267-2742

Received By: [Signature]

Date: 12/17/03

8107434900  
ext 203

**Staffing**  
**H E Services**  
**225 E Morley Dr**  
**Saginaw, MI 48601**  
**USA**  
Voice: (989) 753-9015  
Fax: (989) 753-7703

# **Invoice**

Invoice Number:  
117

Invoice Date:  
Jan 19, 2004

Page: 1

**Sold To:**  
Delphi  
3900Holland Ave  
Saginaw, MI 48601  
USA

**Ship to:**  
Delphi  
3900Holland Ave  
Saginaw, MI 48601  
USA

| Customer ID |       | Customer PO   |            | Payment Terms |        |
|-------------|-------|---|------------|---------------|--------|
| delphi      |       | S2S45116  |            | Net 30 Days   |        |
| Quantity    | Item  | Description   | Unit Price | Extension     | Job ID |
| 2.00        | Labor | Lead Designer - Spine helix<br>ending rolling head design<br>improvements. PR393213-001 | 42.00      | 84.00         | 20897  |
| 8.00        | Labor |   | 42.00      | 336.00        | 20897  |
| 8.00        | Labor |   | 42.00      | 336.00        | 20897  |
| 8.00        | Labor |   | 42.00      | 336.00        | 20897  |
| 8.00        | Labor |   | 42.00      | 336.00        | 20897  |

Check/Credit Memo No:

Total Invoice Amount

1,428.00

**Remit Payment To:**  
**H. E. SERVICES**  
**c/o COMERICA**  
**DEPARTMENT #274201**  
**P.O. BOX 67000**  
**DETROIT, MI 48267-2742**

Authorized By: \_\_\_\_\_

Date: \_\_\_\_\_

**SHIPPER/INVOICE**



H.E. Services / Ancon Prototype & Machine / Universal Tool / Universal Inspection / Universal Manufacturing

5117 S. Dort Hwy • Flint, MI 48507 • 810-743-4900 • Fax 810-743-8400

Delphi  
3900 Holland Ave  
Saginaw, MI 48601  
United States  
Attn: Dan Braun

INVOICE: 6517

P.O. Number S2S45116

HES CONTACT: Amy Pumpera

DATE: 01/21/2004

**DESCRIPTION:**

For the Period: [01/12/2004 through 01/18/2004]

| <u>ITEM CODE</u> | <u>PROJECT</u>                    | <u>AMOUNT</u> |
|------------------|-----------------------------------|---------------|
| PR393213 001     | 7622089700 - T&M for Larry Wehner | \$210.00      |
| TOTAL AMOUNT     |                                   | \$210.00      |

**Remit Payment To:**

H.E. Services  
c/o Comerica  
Department # 274201  
PO BOX 67000  
Detroit, MI 48267-2742

Received By: 

Date: 2/2/04

Invoice Attachment 006517  
Project/Wrk Ord 76-2-20897-00

Delphi

Page

1 of 1

## Invoice Attachment

Project/Wrk Ord Larry Wehner  
Lead Designer - Spline helix ending rolling head design improvements

Task Lead Designer

|                          |                |           | Current<br>Hours | Rate  | Current<br>Amount |
|--------------------------|----------------|-----------|------------------|-------|-------------------|
| Labor:                   |                |           |                  |       |                   |
| Engineer IV              | LARRY WEHNER   | 1/18/2004 | 34.00            | 42.00 | 1,428.00          |
|                          | 76 w/e 1/18/04 |           |                  |       |                   |
|                          | Labor:         |           | 34.00            |       | 1,428.00          |
| Subtotal Task            | Lead Designer  |           |                  |       | 1,428.00          |
| Subtotal Project/Wrk Ord | Larry Wehner   |           |                  |       | 1,428.00          |

**Staffing**  
**H E Services**  
**225 E Morley Dr**  
**Saginaw, MI 48601**

**USA**  
Voice: (989) 753-9015  
Fax: (989) 753-7703

## Invoice

Invoice Number:  
116

Invoice Date:  
Jan 12, 2004

Page: 1

**Sold To:**  
Delphi  
3900Holland Ave  
Saginaw, MI 48601  
USA

**Ship to:**  
Delphi  
3900Holland Ave  
Saginaw, MI 48601  
USA

**Customer ID**  
Delphi

**Customer PO**  
S2S45116

**Payment Terms**  
Net 30 Days

| Quantity | Item  | Description  | Unit Price | Extension | Job ID |
|----------|-------|--|------------|-----------|--------|
| 9.50     | Labor | Lead Designer - Spline helix<br>ending rolling head design<br>improvements. PR393213-001 | 42.00      | 399.00    | 20897  |
| 8.00     | Labor |  | 42.00      | 336.00    | 20897  |
| 8.00     | Labor |  | 42.00      | 336.00    | 20897  |
| 8.00     | Labor |  | 42.00      | 336.00    | 20897  |
| 3.00     | Labor |  | 42.00      | 336.00    | 20897  |

Check/Credit Memo No:

Total Invoice Amount

1,743.00

**Remit Payment To:**  
**H. E. SERVICES**  
**c/o COMERICA**  
**DEPARTMENT #274201**  
**P.O. BOX 67000**  
**DETROIT, MI 48267-2742**

Authorized By: \_\_\_\_\_

Date: \_\_\_\_\_

SHIPPER/INVOICE



H.E. Services / Ancon Prototype & Machine / Universal Tool / Universal Inspection / Universal Manufacturing  
5117 S. Dort Hwy • Flint, MI 48507 • 810-743-4900 • Fax 810-743-8400

Delphi  
3900 Holland Ave  
Saginaw, MI 48601  
United States  
Attn: Dan Braun

INVOICE: 6307

P.O. Number S2S45116

HES CONTACT: Amy Pumpera

DATE: 01/14/2004

DESCRIPTION:

For the Period: [01/05/2004 through 01/11/2004]

| <u>ITEM CODE</u> | <u>PROJECT</u>                    | <u>AMOUNT</u> |
|------------------|-----------------------------------|---------------|
| PR393213 001     | 7622089700 - T&M for Larry Wehner | \$525.00      |
| TOTAL AMOUNT     |                                   | \$525.00      |

Remit Payment To:

H.E. Services  
c/o Comerica  
Department # 274201  
PO BOX 67000  
Detroit, MI 48267-2742

Received By: 

Date: 2/20/04





DELPHI

DELPHI SAGINAW STEERING SYSTEM  
3900 HOLLAND RD.  
SAGINAW MI  
48601

US

VENDOR NUMBER 14-423-0695  
THE SERVICES CO  
ANCON TOOL DIV  
5117 S DORT HWY  
FLINT MI  
48507

TO:

DELPHI SAGINAW STEERING SYS.  
(3SI) SERVICE ORDERS  
3900 HOLLAND RD  
SAGINAW MI  
48601

US

DELPHI  
SEE INVOICE  
INSTRUCTIONS 00  
00000

INVOICE TO:

PURCHASE  
ORDER: S2S45340

This Number Must Appear On All Invoices, Packing Slips,  
Packages and Bills of Lading.  
(2) copies of your packing slip must accompany each shipment  
Item Identification Number(s) must be shown on Packing Slips and  
Invoices.  
Invoice Attn: Accounts Payable  
Do not Declare Valuation of Express Shipments or Insure Parcel  
Post.

ORDER DATE 10/30/03  
ALTERATION ISSUE DATE  
ALTERATION EFFECTIVE DATE  
989-757-4048  
S RUDZINSKI  
S12  
Buyer  
PURCHASING AGENT

This order is not binding until accepted. Acceptance should be executed on acknowledgment copy which should be  
returned to Buyer.  
On the reverse side hereof are the terms and conditions to which Seller agrees by acceptance of this order.  
This order, including the terms and conditions on the face and reverse side hereof, contains the complete and final  
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will be binding upon the Buyer unless made in writing and signed by Buyer's authorized representative.  
If Government Contract Number is Shown Hereon, additional Terms and Conditions  
Attached Hereto Apply.

| PAYMENT TERMS   |                     |                         |           | F.O.B.               |               | DESTINATION UNLESS OTHERWISE INDICATED |             | SHIP VIA        |                    | SEE BELOW           |                 |
|---|---------------------|-------------------------|-----------|----------------------|---------------|--|-------------|-----------------|--------------------|---------------------|-----------------|
| NET   |                     |                         |           | 2ND DAY OF 2ND MONTH |               | SHIPPING POINT                         |             |                 |                    |                     |                 |
| ITEM<br>SEQUENCE                                      | QUANTITY<br>ORDERED | ITEM IDENTIFICATION NO. | NOUN NAME | DESCRIPTION          | RFQ<br>NUMBER | DATE REQUIRED                          | TAX CODE/ % | BASE UNIT PRICE | UNIT<br>MULTIPLIER | PRICE<br>MULTIPLIER | UNIT<br>MEASURE |
| THIS ORDER IS LISTED IN THE FOLLOWING CURRENCY        |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| USD DOLLAR (UNITED STATES)                            |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| THIS IS A MATERIAL REQUEST AGAINST MBO S2B00034       |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| LEAD DESIGNER - SPLINE HELIX END ROLLING HEAD DESIGN  |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| IMPROVEMENTS  |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| WHO ORDERED: D.BRAUN/757-5544                         |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| ALL INVOICES MUST BE SENT TO: D.BRAUN/757-5544        |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| AT DELPHI SAGINAW TO INSURE                           |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| PAYMENT. FAILURE TO DO SO MAY RESULT                  |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| IN NON-PAYMENT OF INVOICES. PURCHASE ORDER            |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| NUMBER AND APPROPRIATE ITEM IDENTIFICATION            |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| NUMBERS MUST APPEAR ON ALL INVOICES. (IN)             |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| *RIGHT TO AUDIT*                                      |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| (ZH)  |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| BY ACCEPTANCE OF THIS PURCHASE ORDER THE SELLER OF    |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| GOODS AND/OR SERVICES GRANTS BUYER THE RIGHT TO AUDIT |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| ALL CHARGES AND AGREES THAT ALL RECORDS SUPPORTING    |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| CHARGES (INCLUDING THOSE OF SUBSIDIARIES AND AFFIL-   |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| IATES TO WHOM WORK HAS BEEN CONTRACTED) WILL BE       |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| AVAILABLE FOR AUDIT BY DELPHI AUTOMOTIVE FOR          |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| A PERIOD OF ONE (1) YEAR BEYOND FINAL PAYMENT.        |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| *****SALES TAX CODES***** (TX)                        |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| PLEASE NOTE OUR SALES TAX CLASSIFICATIONS FOR THIS    |                     |                         |           |                      |               |  |             |                 |                    |                     |                 |
| 00001   | 9000                | PR382566 001            |           |                      |               | 11/28/03                               | B 0.00%     | 1.0000          |                    |                     |                 |
| 7887  | 1113.00             | 164 2-15-04             |           |                      |               |  |             |                 |                    |                     |                 |
| 0228  | 1659.00             | 178 2-22-04             |           |                      |               |  |             |                 |                    |                     |                 |
| 4506  | 1722.00             | 184 2-29-04             |           |                      |               |  |             |                 |                    |                     |                 |
|   | 1522.50             | 192 3-7-04              |           |                      |               |  |             |                 |                    |                     |                 |
|   | 377.00              | 195 3-14-04             |           |                      |               |  |             |                 |                    |                     |                 |
| 527.00  | 1680.00             | 201 3-21-04             |           |                      |               |  |             |                 |                    |                     |                 |
| 153.00  | 1680.00             | 213 3-28-04             |           |                      |               |  |             |                 |                    |                     |                 |



DELPHI

DELPHI SAGINAW STEERING SYSTEM  
3900 HOLLAND RD.  
SAGINAW MI  
48601

US

VENDOR NUMBER 14-423-0695  
HE SERVICES CO  
ANCON TOOL DIV  
5117 S DORT HWY  
FLINT MI  
48507

TO:

DELPHI SAGINAW STEERING SYS.  
(3SI) SERVICE ORDERS  
3900 HOLLAND RD  
SAGINAW MI  
48601

US

DELPHI  
SEE INVOICE  
INSTRUCTIONS 00  
00000

INVOICE TO:

US

PURCHASE

PAGE

3

ORDER: S2S45340

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Post.

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ALTERNATION ISSUE DATE  
ALTERNATION EFFECTIVE DATE  
989-757-4048  
S. RUDZINSKI  
S12  
Buyer  
PURCHASING AGENCY

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will be binding upon the Buyer unless made in writing and signed by Buyer's authorized representative.  
If Government Contract Number is Shown Hereon, additional Terms and Conditions  
Attached Hereto Apply.

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| ITEM<br>SEQUENCE | QUANTITY<br>ORDERED | ITEM IDENTIFICATION NO. | NOUN NAME | DESCRIPTION  | RFQ<br>NUMBER | DATE REQUIRED | TAX CODE/ % | BASE UNIT PRICE | PRICE<br>MULTIPLIER<br>UNIT<br>MEAS |
|------------------|---------------------|-------------------------|-----------|--|---------------|---------------|-------------|-----------------|-------------------------------------|
|                  |                     |                         |           | NOT TO BE CONSTRUED AS REPRESENTING A COMMITMENT BY<br>BUYER TO PURCHASE THESE QUANTITIES. |               |               |             |                 |                                     |
|                  |                     |                         |           | TERMS AND CONDITIONS JANUARY 2001, APPLY<br>OF WHICH SUPPLIER HAS RECEIVED A COPY.         |               |               |             |                 |                                     |

A000808 USER STEPHEN PARKS

ORIGINAL

LAST PAGE

SMDL03 01/15/2003

**H E Services**  
**225 E Morley Dr**  
**Saginaw, MI 48601**  
**USA**  
Voice: (989) 753-9015  
Fax: (989) 753-7703

Invoice Number:  
192  
Invoice Date:  
Mar 10, 2004  
Page: 1

**Sold To:**  
Delphi  
3900Holland Ave  
Saginaw, MI 48601  
USA

**Ship to:**  
Delphi  
3900Holland Ave  
Saginaw, MI 48601  
USA

| Customer ID | Customer PO | Payment Terms |
|-------------|-------------|---------------|
| Delphi      | s2s45340    | Net 30 Days   |
|             |             |               |
|             |             |               |

| Quantity | Item  | Description   | Unit Price | Extension | Job ID |
|----------|-------|---|------------|-----------|--------|
| 8.75     | Labor | Larry Wehner-Lead Designer-Spine<br>Helix and Rolling Head Design<br>Improvements. PR382566-001 | 42.00      | 367.50    | 20897  |
| 9.00     | Labor |   | 42.00      | 378.00    | 20897  |
| 9.00     | Labor |   | 42.00      | 378.00    | 20897  |
| 9.50     | Labor |   | 42.00      | 399.00    | 20897  |

Check/Credit Memo No:

Total Invoice Amount

1,522.50

**Remit Payment To:**  
**H. E. SERVICES**  
**c/o COMERICA**  
**DEPARTMENT #274201**  
**P.O. BOX 67000**  
**DETROIT, MI 48267-2742**

Authorized By: \_\_\_\_\_

Date: \_\_\_\_\_

Staffing 05-44481-rdd Doc 7418-18 Filed 03/26/07 Entered 03/26/07 15:47:11 Exh 1-3  
H F Services Ancon Pg 14 of 20

## HE Services

225 E Morley Dr  
Saginaw, MI 48601  
USA

Voice: (989) 753-9015

Fax: (989) 753-7703

Invoice Number:

200

Invoice Date:

Mar 15, 2004

Page:

1

Sold To:

Delphi  
3900Holland Ave  
Saginw, MI 48601  
USA

Ship to:

Delphi  
3900Holland Ave  
Saginw, MI 48601  
USA

|             |             |               |  |
|-------------|-------------|---------------|--|
| Customer ID | Customer PO | Payment Terms |  |
| Delphi      | S2S45340    | Net 30 Days   |  |
|             |             |               |  |
|             |             |               |  |

| Quantity | Description  | Unit Price | Extension | Job ID |
|----------|--------------|------------|-----------|--------|
|          | Larry Wehner |            | 777.00    |        |

Check/Credit Memo No:

Total Invoice Amount

777.00

Remit Payment to:

H. E. SERVICES

c/o COMERICA

DEPARTMENT #274201

P.O. BOX 67000

DETROIT, MI 48267-2742

Authorized By: \_\_\_\_\_

Date: \_\_\_\_\_

Page: 1

Date: \_\_\_\_\_







Date: \_\_\_\_\_

Staffing 05-44481-rdd Doc 7418-18 Filed 03/26/07 Entered 03/26/07 15:47:11 Excluded  
Ancon Pg 19 of 20 Invoice Number

**H E Services**  
**225 E Morley Dr**  
**Saginaw, MI 48601**  
**USA**

Voice: (989) 753-9015

Fax: (989) 753-7703

Invoice Number:

202

Invoice Date:

Mar 22, 2004

Page:

1

Sold To:

Delphi  
3900Holland Ave  
Saginw, MI 48601  
USA

Ship to:

Delphi  
3900Holland Ave  
Saginw, MI 48601  
USA

|             |             |               |  |
|-------------|-------------|---------------|--|
| Customer ID | Customer PO | Payment Terms |  |
| Delphi      | S2S45166    | Net 30 Days   |  |
|             |             |               |  |
|             |             |               |  |

| Quantity | Description  | Unit Price | Extension | Job ID |
|----------|--------------|------------|-----------|--------|
|          | Larry Wehner |            | 1,680.00  |        |

Check/Credit Memo No:

Total Invoice Amount

1,680.00

Remit Payment to:

H. E. SERVICES

c/o COMERICA

DEPARTMENT #274201

P.O. BOX 67000

DETROIT, MI 48267-2742

Authorized By: \_\_\_\_\_

Date: \_\_\_\_\_

